## 2017-10-16-08-00177521

FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

ADDRESS (number and street)  Check if different than previously reported. (ACC)  PEC IDENTIFICATION NUMBER V  CITY A  STATE A  ZIP CODE A  3. IS THIS REPORT (Choose One)  (a) Quarterly Report (Q1)  July 15  Quarterly Report (Q2)  Convertey Report (Q2)  Quarterly Report (Q2)  Quarterly Report (Q2)  Quarterly Report (Q3)  January 31  Year-End Report (Non-lection Report (YE)  July 31 Mid-Wear Report (Non-lection Near Only) (MY)  Termination Report (TER)  Covering Period  Covering							Office Use Only			
Check if different than previously reported. (ACC)  PAINCHIC STER  CHANNING TO THE PORT  Choose One)  (a) Quarterly Reports:  April 15  Quarterly Report (Q1)  Quarterly Report (Q2)  Quarterly Report (Q3)  January 31  Year-End Report (YE)  January 31  Year-End Report (YE)  January 31  Year-End Report (YE)  Guarterly Report (Q3)  April 15  Counterly Report (Q3)  Guarterly Report (Q3)  April 15  Counterly Report (Q4)  Quarterly Report (Q5)  General (12G)  Report for the:  Convention (12C)  Special (12S)  Convertion (12C)  Special (12S)  Covering Period  Convention (12C)  Covering Period  Covering Perio		YPE OR PRINT ▼			g, type	12FE4M	5	1		
Check if different than previously reported. (ACC)  PAINCHIC STER  CHANNING TO THE PORT  Choose One)  (a) Quarterly Reports:  April 15  Quarterly Report (Q1)  Quarterly Report (Q2)  Quarterly Report (Q3)  January 31  Year-End Report (YE)  January 31  Year-End Report (YE)  January 31  Year-End Report (YE)  Guarterly Report (Q3)  April 15  Counterly Report (Q3)  Guarterly Report (Q3)  April 15  Counterly Report (Q4)  Quarterly Report (Q5)  General (12G)  Report for the:  Convention (12C)  Special (12S)  Convertion (12C)  Special (12S)  Covering Period  Convention (12C)  Covering Period  Covering Perio	GRANITGIOATI	HIPACL	<u> </u>	1111				<u> </u>		
Check if different than previously reported. (ACC)  PAINCHIC STER  CHANNING TO THE PORT  Choose One)  (a) Quarterly Reports:  April 15  Quarterly Report (Q1)  Quarterly Report (Q2)  Quarterly Report (Q3)  January 31  Year-End Report (YE)  January 31  Year-End Report (YE)  January 31  Year-End Report (YE)  Guarterly Report (Q3)  April 15  Counterly Report (Q3)  Guarterly Report (Q3)  April 15  Counterly Report (Q4)  Quarterly Report (Q5)  General (12G)  Report for the:  Convention (12C)  Special (12S)  Convertion (12C)  Special (12S)  Covering Period  Convention (12C)  Covering Period  Covering Perio								لــــــــــــــــــــــــــــــــــــــ		
than previously reported. (ACC)    Manual Harmonian Report (ACC)   Manual Harmonian Report (AC	ADDRESS (number and street)	6701 NOR	THE ICLO	MMGA	BOLAL	LISITIR	CETTIL	0.8		
than previously reported. (ACC)    Manual Harmonian Report (ACC)   Manual Harmonian Report (AC	▼ Check if different									
3. IS THIS REPORT (N) OR (A)  4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:    April 15   Quarterly Report (Q1)   Quarterly Report (Q2)   Quarterly Report (Q2)   Quarterly Report (Q2)   Quarterly Report (Q3)   Quarterly Report (Q2)   Quarterly Report (Q3)   Quarterly Report (Q4)   Quarterly Report (Q5)   Quarterly Report (Q6)   Quarterly Report (Q6)   Quarterly Report (Q6)   Quarterly Report (Q7)   Qua	than previously	MAINCHES	16R-1	<u> </u>	ا ليا	MH (	0131105	-  -		
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  Cotober 15 Quarterly Report (Q2)  Quarterly Report (Q2)  Quarterly Report (Q2)  April 15 Quarterly Report (Q2)  Quarterly Report (Q2)  April 15 Quarterly Report (Q2)  Quarterly Report (Q2)  Quarterly Report (Q2)  April 15 Quarterly Report (Q2)  Cotober 15 Quarterly Report (Q2)  April 15 Quarterly Report (Q2)  April 15 Quarterly Report (Q2)  PRE-Election Report (TER)  April 15 Quarterly Report (Q2)  April 15 Quarterly Report (Q2)  Cotober 15 Quarterly Report (Q3)  April 15 Quarterly Report (Q2)  PRE-Election Report (TER)  April 15 Quarterly Report (Q2)  April 16 Quarterly Report (Q3)  April 17 Quarterly Report (Q2)  April 18 Quarterly Report (Q2)  Cotober 18 Quarterly Report (Q3)  April 19 Quarterly Report (Q4)  April 10 Quarterly Rep	2. FEC IDENTIFICATION NUM	BER ▼	CITY A		s	TATE 🛦	ZIP C	ODE A		
(Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1) Quarterly Report (Q2) Cotober 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Ally 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (Non-election Year Only) (MY)  Termination Report (TER)  Report (All 20 (M3)  January 31 PRE-Election Report (PE) General (12G) Runoff (1: Convention (12C) Special (12S)  Function Report (YE) General (30G) Runoff (30R) Special (30R) Special (30R) Special (30R) Special (30R) Report (YE) First or the:  Convention (12C) Special (12S)  Covering Period  Cov	Cleannin	<u> </u>		The same of the sa				1		
Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M9		· · · · · · · · · · · · · · · · · · ·	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election		
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October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)  Covering Period  Termination Report (TER)  Election on  General (30G)  Runoff (30R)  Special (30G)  Runoff (30R)  Special (30G)  Fost-Election on  Feport for the:  Election on  Feport for the:  Election on  Feport (Non-election on o		) [	- Pro-	Convention (	12C)	Special (	12S)			
State of		)	:	·			_			
Report (Non-election Year Only) (MY)  POST-Election General (30G)  Report (30R)  Special (3 Runoff (30R))  Formination Report (TER)  Felection on Fe		)E	lection on		ا النا					
Termination Report (TER)  Election on  Election on  Election on  Election on  In the State of  Covering Period  In the State of  Election on  Election on  Election on  Election on  In the State of  Election on  El	Report (Non-election	POST-Elect	1	General (300	s) [	Runoff (3	OR)	Special (30S)		
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Signature of Treasurer  Date  Date  Date  NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §				M M /	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
Signature of Treasurer  Date  Date  Date  NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §	5. Covering Period	<u> </u>		through	05	ا گره ۱	201)	]		
Signature of Treasurer  Date	•	•		_	pelief it is true	e, correct and	d complete.			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §	Type or Print Name of Treasurer	Jim 1	NERR	ILL		<del></del>				
	Signature of Treasurer	m			Da	ate 10	1 3	2017		
	NOTE: Submission of false, erroneo	ous, or incomplete infor	mation may su	bject the per	son signing thi	is Report to th	ne penalties of	52 U.S.C. § 3010		
Use Only FEC FORM 3X Rev. 05/2016	1 1	•								